

Year 2016

Employee Benefits Guide

ET and EG Officers in Council of School Officers Positions

Reach us via email: dcps.benefits@dc.gov

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Introduction to Benefits

Welcome to DC Public Schools!

We are pleased that you have joined us as an employee of DC Public Schools (DCPS)! In this Employee Benefits Guide you'll find information to help acquaint you with our full range of benefits.

Who is eligible for health benefit coverage?

District of Columbia Public Schools provides a comprehensive benefits plan to the following employees and their eligible dependents:

- All Full-Time Permanent Employees
- All Part-Time Permanent Employees who generally work at least 20 hours per week
- Employees with Temporary or Substitute Full-Time appointments of 13 months or at least paid for 30 hours per week (or 120 hours per month)

The employee's District Government service date determines which benefits plan is available. Employees who began benefits-eligible employment with the District Government prior to October 1, 1987 participate in the Federal Employees Health Benefits (FEHB) Plan, while employees with a District Government service date of October 1, 1987 or later participate in the District of Columbia Employees Health Benefits (DCEHB) Plan.

The chart below lists all dependents eligible for health insurance. You are required to provide social security numbers and dates of birth for all dependents.

DEPENDENT	PLAN TYPE
Legally Married Spouse	Federal and District Plans
Domestic Partner - Common Law Spouse - Same-Sex Partner	District Plan Only
Unmarried Children - Until reaching age 26	Federal and District Plans
Disabled Adult Children Note: Child must have been disabled before age 22	Federal and District Plans

Additional Details

Health coverage does not begin on the first day of employment. Coverage for health insurance and additional optional benefits takes effect on the first day of the pay period following your online enrollment. The provider mails health insurance cards approximately four to six weeks after the online application is processed.

The District carries the majority of the cost of health benefits coverage with a 28% supporting contribution from you. Your share is paid with pre-tax dollars deducted from each paycheck. If you are enrolling a domestic partner, your share is paid with after-tax dollars deducted from each paycheck.

In order to carry newly elected health insurance coverage into retirement, new coverage must be in effect for the five years of service immediately preceding the retirement date or the entire period of service during which coverage was available (if this period is less than five years).

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Explanation of Benefits Options – Health Plans

Transgender Benefits Available through All Healthcare Providers

Through all District healthcare providers, covered transgender benefits include sexual reassignment surgery and mastectomy with chest reconstruction, in addition to mental health and hormone therapy services. Cost sharing is the same as cost sharing for other medical services (e.g., inpatient hospital cost sharing, office visit cost sharing, etc.)

Healthcare Reform Update

The Affordable Care Act ("ACA," also known as "health care reform") was passed in 2010. This law is intended to extend access to medical coverage to nearly everyone in the U.S. and to eliminate restrictions on key benefits. On January 1, 2015, the Government began to require almost everyone in the U.S. to have medical insurance coverage. Those who don't have medical coverage will pay a penalty -- this requirement is call the "individual mandate." (The only exception to this requirement is if you earn below a certain level of income.)

Note that eligibility for healthcare benefits has been extended to include some temporary and intermittent employees (i.e., employees who work for at least 90 days within a 12-month evaluation period and are paid at least 30 hours per week (or 120 hours per month). Employees falling into this category are eligible to participate only in a HMO healthcare plan.

2016 Health Benefit Plan Options (District Employees Only)

The Explanation of Benefits (EOB) below pertains to employees participating in the District of Columbia Employee Health Benefits Plan only. Employees receiving health and life insurance benefits through the Federal Employees Health Benefits Plan should obtain more information by contacting the Benefits team via email at dcps.benefits@dc.gov.

DCPS offers the flexibility of selecting a HMO, PPO, or CDHP plan option for health insurance coverage. There are distinct differences among each option:

Health Maintenance Organization (HMO): Aetna, Kaiser Permanente

- Requires you to select a primary care physician within plan network of providers (Kaiser only)
- Requires that you obtain a referral for specialist care (Kaiser only)
- Services rendered by out of network providers will not be considered as eligible expenses under the plan

Open Choice (PPO): Aetna

- No primary care physician selection required, no referrals needed
- Provides both in and out of network benefits
- Provides nationwide coverage for non-emergency care

Nationwide Choice (HMO): United Health Care

- No primary care physician selection required, no referrals needed
- Plan provides nationwide coverage for services rendered by physicians seen within network
- Services rendered by out of network providers will not be considered as eligible expenses under the plan

Consumer Driven Health Plan (CDHP)

- No primary care physician selection required, no referrals needed
- A Health Savings Account (HSA) is available with this plan, where the employee maximum contribution is \$3,100 for Self, \$6,250 for Self+1, and \$6,250 for Family (unused funds roll over into the following year and are portable)
- Employees cannot participate in both CDHP and a Healthcare Flexible Spending Account

NOTE: All of the healthcare providers require employees to maintain a local address in PeopleSoft.

NEED MORE INFORMATION?

For information regarding the health plan providers, co-payments, deductibles, etc., please visit http://dcps.dc.gov/page/employee-benefits-00.

Visit the healthcare websites located in the Points of Contact section (p. 30) for additional information on plans, services covered, and participating providers.

Federal Employees Health Benefits (FEHB) Information

Employees originally hired by the District Government prior to October 1, 1987 are eligible to receive health, dental, and life insurance benefits sponsored by the Federal Government. To obtain more information about these benefits, please visit the Office of Personnel Management (OPM) website (http://www.opm.gov/insure) or contact the Benefits team via email at decs.benefits@dc.gov.

Federal Employees Health Benefits (FEHB) Self Plus One Enrollment Information

Note that OPM has implemented a new enrollment type, called "Self Plus One." effective January 1, 2016. Previously, the only enrollment types available were Self Only and Self and Family.

Explanation of Benefits Options - Dental/Optical and SLB

Council of School Officers (CSO) Benefits

Who is eligible for CSO Benefits?

DCPS employees in positions coded ET Officer 6-13 and EG Officer 11-12 are eligible for Council of School Officers benefits. Please refer to your offer letter to confirm your eligibility or contact your Strategic Staffing Specialist. As a member of the Council of School Officers Collective Bargaining Unit, employees pay organizational dues directly to the union.

CSO Dental & Optical Benefits

As a member of the CSO, you are entitled to Dental and Optical benefits provided by the union. The CSO offers two Dental plan options called the Freedom-of-Choice PPO and the Freedom-of-Choice DMO through Aetna. Optical benefits are provided through United Healthcare Vision. For more information on the Benefits plan and enrollment information for both Dental and Optical coverage, please call the CSO office at 202.526.4700.

CSO Sick Leave Bank

As a member of the CSO, you are eligible to join the CSO Sick Leave Bank, which grants you up to 60 days of sick leave per year for an extended illness. Each participating member contributes eight hours (1 day) of sick leave each school year. For details and enrollment information, you may call the CSO office at 202.526.4700.

CSO Annual & Sick Leave Accruals

All members of the CSO accrue four hours of sick leave per pay period for a total of 13 days per calendar year. Officers with less than three years of service accrue four hours of annual leave per pay period for a total of 13 days per calendar year. Upon completion of three years of service, Officers accrue six hours of annual leave per pay period for a total of 20 days per calendar year. Upon completion of 15 years of service, Officers accrue eight hours of annual leave per pay period for a total of 26 days per calendar year.

For detailed information regarding additional benefits provided by the Council of School Officers, please contact the union directly at 202.526.4700.

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Explanation of Benefits - Life Insurance

DCPS offers several Life Insurance options to eligible employees. Benefits eligible employees hired on or after 10/01/1987 participate in the District of Columbia Employees Group Life Insurance (DCEGLI) Plan.

Basic Life Insurance

Coverage begins on Day 1 of employment and you are automatically enrolled in the benefit **unless you decline** coverage. Basic life insurance is equal to 1x your annual salary (rounded up to the nearest \$1,000) plus \$2,000.

You cannot elect supplemental life insurance unless you elect to enroll within 31 days of your hire date.

Supplemental Life Insurance

To enroll in supplemental options, you must be enrolled in the Basic Life insurance option. Rates are based on age and salary.

Standard: Option A

Additional \$10,000 worth of insurance coverage

Additional: Option B

Additional coverage equivalent to one up to five times your annual salary

Family: Option C

- \$10,000 life insurance for eligible spouse
 - \$10,000 life insurance for eligible dependent child
- \$25,000 life insurance for eligible spouse
 - \$10,000 life insurance for eligible dependent child
- \$50,000 life insurance for eligible spouse
 \$10,000 life insurance for eligible dependent child

NOTE: Employees have the ability to decrease supplemental life insurance at any time. However, if you waive Basic Life or decline one or more of the options, your opportunity to cancel your waiver or enroll in a supplemental option you previously declined is strictly limited.

In order to carry newly elected life insurance coverage into retirement, new coverage must be in effect for the five years of service immediately preceding the retirement date or the entire period of service during which coverage was available (if this period is less than five years).

A waiver or cancellation of coverage also may affect your eligibility for continuing coverage into retirement.

Accidental Death and Dismemberment Insurance (AD&D)

This additional benefit is provided at no cost to the employee. Coverage is equal to 1x annual salary plus \$2,000, and the full benefit is available until age 35. Beginning on the employee's 36th birthday, AD&D coverage decreases by 10% each year until age 45. At age 45, AD&D is no longer available to the employee.

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Explanation of Benefits Offered – Supplemental Insurance

Supplemental Insurance plans provide security, peace of mind, and satisfaction in knowing that you have taken a step toward securing your income during a period of disability. Plans offered to DCPS employees include:

Short Term Disability Coverage

Short Term Disability (STD) is designed to pay a weekly benefit to you in the event that you cannot work due to a covered illness or injury. This benefit replaces 66.3% of your income, thus helping you to meet your financial commitments in a time of need. Short Term Disability may be used in conjunction with annual or sick leave.

If you become disabled and your claim for STD benefits is approved by The Standard, benefits may be payable for up to 180 days, following the benefit waiting period. The benefit waiting period is a specified number of days during which you must remain continuously disabled. STD benefits are not payable during the Benefit Waiting Period.

The Benefit Waiting Period is 20 days for the following causes of disability:

- Accidental injury
- Physical disease, pregnancy, or mental disorder

Long Term Disability Coverage

Long Term Disability (LTD) insurance is designed to pay a weekly benefit to you in the event that you cannot work due to a covered illness or injury. If you become disabled and your claim for LTD benefits is approved by The Standard, LTD benefits become payable after you have been continuously disabled for 180 days and remain continuously disabled. LTD benefits are not payable during the Benefit Waiting Period.

The Benefit Waiting Period is 180 days for the following causes of disability:

- Accidental injury
- Physical disease, pregnancy, or mental disorder

The coverage can help with the everyday bills, such as the mortgage or rent, that continue even when you can't work. LTD may be used in conjunction with annual or sick leave. The maximum monthly benefit is equal to \$7,500 (depending upon annual salary), with worldwide coverage provided and a waiver of premiums while disabled. If you become disabled before age 62, LTD benefits may continue during disability until you reach age 65.

Travel Assistance

Travel Assistance is a comprehensive program of information, referral, assistance, transportation, and evacuation services designed to help you respond to medical care situations and many other emergencies that may arise during travel. Travel assistance also offers pre-travel assistance, which gives you access to information on things like passport and visa requirements, foreign currency, and worldwide weather. All services are provided by one of the most experienced assistance companies in the United States, FrontierMEDEX.

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Employees who are enrolled in DCPS Basic Life Insurance are automatically covered by Travel Assistance. Coverage also extends to the employee's spouse (domestic partner) and children through age 25, regardless of student or marital status.

AFLAC Indemnity Plan

AFLAC offers a distinct type of protection. Unlike major medical health insurance, AFLAC pays <u>you</u> (unless otherwise assigned), <u>not</u> the doctor or hospital. Note that AFLAC does not replace medical insurance – it is an additional benefit that provides cash benefits and allows you to spend them as you like to help with the financial challenges an accident or illness may impose. Types of medical issues covered include:

- Cancer/Specified-Disease
- Hospital Confinement Sickness Indemnity
- Hospital Confinement Indemnity
- Specified Health Event
- Accident Indemnity

For more information, visit www.aflacclients.com/dcgov/Welcome.aspx or contact the AFLAC Customer Service Line at 202.442.9718.

NOTE: You are required to meet with an AFLAC Customer Care Representative to complete the enrollment process. If you do not meet with an AFLAC representative, the elections made through PeopleSoft will not be honored and all AFLAC deductions will be returned to you as taxable income.

Employee Assistance Plan

The Employee Assistance Program (EAP) is a free, confidential, 24/365 service for employees and their immediate family members age 18 and older. Following are the two providers employees may contact for EAP services.

Inova Employee Assistance Program is a comprehensive, top ranked international provider of employee assistance services. With telephonic access and convenient online resources, Inova EAP offers practical, real world solutions to employee life issues that may derail productivity and satisfaction. Employees have access to helpful materials that will assist with a range of Work-Life services, such as Parenting, Aging, Career and Workplace Education, Health, Wellness, and other daily living topics.

COPE, Inc. has been providing EAP services to workplaces and their employees for over 30 years. These services are designed to help employees with everyday problems in living, including emotional or marital problems, stress, depression and anxiety, family or relationship troubles, alcohol or drug abuse, workplace difficulties, and financial or legal referrals.

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Explanation of Benefits Offered – Flexible Spending Accounts

New 2016 – New Provider for Flexible Spending Accounts (FSA)

Starting in 2016 the District will utilize a new provider, Benefit Resource, Inc., for Flexible Spending Accounts. This provider will allow participants to use a single debit card to directly access funds saved through pre-tax spending account deductions. This debit card can be used to pay for eligible healthcare, transit, and parking costs and is accepted at WMATA metro kiosks for direct purchases and reloading SmartTrip cards. Reimbursement checks will be issued for claims filed for eligible dependent care expenses.

DCPS offers all benefits-eligible employees the opportunity to participate in Flexible Spending Accounts (FSA) for Healthcare, Dependent Care, Commuter Transit, and/or Commuter Parking. These pre-tax accounts allow you to pay your work-related daycare, out-of-pocket medical, dental, vision, and transportation expenses on a pre-tax basis. Note that a **FSA only can be added during Benefits Open Enrollment**; however, with a life change event, a FSA can be increased or decreased within 31 days of that event.

Benefits of FSAs	FSAs - Important Information		
Flexible Spending Accounts (FSAs) can help reduce	FSAs runs on a calendar year plan from January		
your taxes and increase your take-home pay.	1 through December 31, so be sure to estimate		
	your expected out-of-pocket expenses carefully.		
On average, people save 23% in taxes by paying	If you do <u>not</u> use all of the money that you		
their out-of-pocket health care and child care	deposit into your healthcare flexible spending		
expenses on a pre-tax basis through a FSA. Actual	account by December 31 of the plan year, up to		
tax savings depends on several variables, including	\$500 of your unused balance will automatically		
state and local tax rates and the tax bracket of the	roll over to the next year plan, according to IRS		
participant:	regulations. All receipts for the plan year's		
	expenses must be submitted by March 31 of the		
•15% tax bracket can save up to 22.65%	next calendar year.		
•27% tax bracket can save up to 34.65%			
Online and Mobile Support	You must enroll each year during the benefits		
	Open Enrollment period, or all funds will be		
	forfeited.		
For additional information regarding Benefits Resource, Inc., visit www.BenefitResource.com			

Healthcare

- Employees can set aside up to \$2,500 annually for eligible health expenses.
- Up to \$500 of your unused balance will roll over to the next plan year.
- Eligible expenses include medical, dental, and vision expenses not reimbursed by any plan (e.g., copayments, deductibles).

Dependent Care

- Employees can set aside <u>annually</u> up to \$5,000 (single parent or married and filing taxes jointly) or \$2,500 per person if married and filing taxes separately.
- If married, spouse must be working, searching for a job, in school and enrolled as a full-time student for at least five months of the year, or mentally and/or physically unable to provide care for a dependent for the daycare expenses to qualify for reimbursement.

- All unused money will be forfeited.
- Eligible dependents include:
 - o Dependents under age 13 who can be claimed as exemptions on your federal income tax return.
 - Dependents of any age (including parents who are mentally or physically incapable of self-care and who live regularly in your household at least eight hours per day).

Commuter Transit

All employees may use the Commuter Benefits Transit Plan, which is a pre-tax benefit that is used to pay for your monthly bus, train, and/or metro passes. Contributions to your Transit Plan account are made before any taxes (payroll or income) are taken from your earnings:

- You determine the per paycheck deduction, up to the IRS monthly maximum (\$250 per plan).
- Expenses must be incurred when commuting between work and an employee's residence.
- Provides the opportunity to pay for these expenses with earnings that have not been taxed.

Commuter Parking

Note the following regarding eligible parking expenses:

- You determine the per paycheck deduction, up to the IRS monthly maximum (\$255 per plan).
- Can be used for parking provided to an employee on or near the business premises of the employer.
- Includes commutes by carpool, commuter highway vehicle, and mass transit facilities.
- Payment can be made directly to the location where the employer pays the expense (e.g., parking lot provider) or the employee can be reimbursed.
- Includes parking at locations where the employer provides parking on premises it owns or leases.

Note that <u>only</u> Commuter Transit and Commuter Parking Flexible Spending Accounts can be changed or cancelled at any time during the calendar year.

For more information visit the Benefit Resource, Inc. website at www.BenefitResource.com.

Explanation of Benefits Offered - Additional Benefits

AT&T, Sprint, and Verizon Wireless

You can save up to 15% on qualified charges with AT&T, Sprint, or Verizon Wireless because you are a DC Government employee. Contact the respective company to request the discounts to be added to your active account.

City First Homes

City First Homes is a non-profit organization that supports families and individuals who want to buy a home in Washington, DC through a low-cost Down Payment Assistance Loan. This program is only offered to DC Government Employees. Visit www.cfhomes.org for additional information and to review home listings.

Negotiated Employee Assistance Home Purchase Program

Through this joint labor effort (NEAHP), administered by the District of Columbia Department of Housing and Community Development (DHCD) and the Office of Labor Relations and Collective Bargaining (OLRCB), with the assistance of the Greater Washington Urban League (GWUL), DCPS contributed \$50,000 to NEAHP for <u>Teamsters members</u> to use toward the purchase of a primary residence in the District of Columbia.

DC Teacher Federal Credit Union

All DC Public Schools employees are eligible to join the DC Teachers Federal Credit Union (DCTFU). The purchase of one share (\$50) and payment of a one-time membership fee (\$5) begins your savings account and a lifetime of credit union membership and benefits. For more information visit the website at http://dctfcu.org.

Employee Assistance Program

All employees may use the Employee Assistance Program, which provides confidential counseling and referral services for emotional, professional, or financial problems. Professionals are staffed through Cope, Inc. and Inova to provide counseling services. For more information on Cope, Inc., call 202.628.5240 or 800.841.7406 or visit the website at www.cope-inc.com. For more information on Inova, call 800.346.0110 or visit the website at www.inova.org/eap.

DPR Fitness Center

DC Department of Human Resources (DCHR) and the Department of Parks and Recreation (DPR) have partnered to offer District Government employees <u>free and reduced rates on DPR fitness center memberships</u> through payroll deduction. Employees can elect an annual non-refundable membership that will provide the employee and/or their family members with access to DPR fitness centers. To enroll, complete the online enrollment through PeopleSoft.

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Explanation of Benefits Offered – Retirement Options

ET Teachers Retirement Plan

This is an automatic defined benefit for all employees classified as ET 1 through 15 (school administrators, ET Officers, Educators, and Related Service Providers).

ET-15 employees contribute 8% of earned salary on a pre-tax basis, are vested after five years of service, and do not pay into social security.

Upon retirement from DCPS, ET employees receive a monthly annuity if they meet the age and service requirements. You are eligible to retire from DCPS under voluntary retirement if you meet the age and service criteria in one of the following three categories:

- Age 55 with 30 years of service;
- Age 60 with 20 years of service;
- Age 62 with 5 years of service.

In any category, you must have a minimum of five years of DCPS service.

To be eligible for post-retirement health coverage, you must have:

- At least ten years of creditable district service; and
- At least five years of continuous coverage under a district health plan immediately preceding your retirement.

Complete details on the plan provisions are in your 2012 Teacher's Retirement Plan Summary Plan Description, or visit the DC Retirement Board's website at www.dcrb.dc.gov for more plan information.

457 Deferred Compensation Plan

All benefits-eligible DCPS employees may participate in the 457 Deferred Compensation Plan, which is managed by ICMA-RC. The 457 Plan reduces the amount of taxable income per pay period based on the employee's contribution. This is an optional savings program that allows employees to tax-defer income and invest for the future. The Internal Revenue Service (IRS) determines the maximum annual amount that can be deferred. For plan year 2016, employees may defer up to \$18,000. There are no employer contributions to this plan.

Employees may be eligible for increased annual contributions under a special 457 catch-up provision during the three years prior to the year the employee reaches normal retirement age or, if the employee reaches age 50 or older before the end of the calendar year.

To enroll in the 457 Deferred Compensation Plan you must complete a paper enrollment form with ICMA-RC. To obtain a copy of the enrollment form, please call ICMA-RC at 800.669.7400.

<u>Note: Enrollment selections made through PeopleSoft without a paper enrollment form will not be honored and the money will be deducted and held in escrow. Following the escrow waiting period, the funds will be returned to you and taxed as income.</u>

Please note that you may enroll in the 457 Plan at any time throughout the calendar year.

Explanation of Benefits - Retirement Options (continued)

403(b) Tax Shelter Annuity Plan

The 403(b) Tax Shelter Annuity Plan is an optional retirement savings program that provides employees the opportunity to make pre-tax contributions to a tax shelter annuity (TSA). Eligible employees may defer up to \$18,000 annually for the year. Eligible employees over age 50 may contribute an additional \$5,000 into a TSA. No taxes are paid on the contributions or earnings until the employee withdraws the funds.

How to Enroll

STEP 1: Contact the vendor of your choice. Please note that you may enroll in the 403(b) plan at any time throughout the calendar year.

STEP 2: Meet with a representative to determine your investment strategy and complete their paper enrollment process. The 403(b) investment provider will notify DCPS of your payroll contribution (biweekly deduction) by sending us a Salary Reduction Agreement (SRA).

Note: <u>Enrollment selections made through PeopleSoft without a paper enrollment form will not be honored and the money will be deducted and held in escrow. Following the escrow waiting period, the funds will be returned to you and taxed as income.</u>

2016 APPROVED 401a, 457 and 403(b) VENDORS FOR DCPS EMPLOYEES

Vendor	Name	Phone #	Email address
AXA Equitable	John Anderson	703.207.2790 /	
		202.577.1577 Cell	
	Mark Toia	703.205.0346 /	mark.toia@axa-advisors.com
		323.841.2007 Cell	
	Steven (Tyler)	703.205.0368 /	steven.tisdell@axa-advisors.com
	Tisdell	609.221.3058 Cell	
	Christopher Regan	703.205.0310 /	christopher.regan@axa-
		540.905.1823 Cell	advisors.com
	Danielle Byrd	703.205.0354 /	danielle.byrd@axa-advisors.com
	Thompson	313.530.3492 Cell	
Holistic Planners	Demetrius Felder	202.808.8289 /	d.felder@holisticplanners.com
(The Felder Group)		240.508.2169 Cell	
VOYA Financial	Keith Serrano	301.292.2423/	keithmserrano@voyafa.com
		240.605.6917 Cell	
	Bruce Rome	703.449.2916 /	bruce.rome@voyafa.com
		301.980.9949 Cell	
	Jennifer Holmes	703.449.2953	
	Donald Byrd	240.532.5480 /	donald.byrd@voyafa.com
		301.257.9429 Cell	
	Jeffrey Wheeler	703.405.7880 Cell	jeffrey.wheeler@voyafa.com
Lincoln Investments	Perry (Ray) Stanley	301.987.7211 ext. 62504	pstanley@lincolninvestment.co
		or 800.242.1421	<u>m</u>
MetLife (Travelers)	Iris LaVigne	703.821.5410 /	ilavigne@metlife.com
		703.597.5625 Cell	

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		*	
	Guy Lavigne	443.957.6082 /	glavigne@metlife.com
		703.677.7217 Cell	
	Berhane Kassahun	301.354.3821 /	bkassahun@metlife.com
		202.320.6923 Cell	
New York Life	Melanie White	410.740.4719 /	mwhite@ft.newyorklife.com
	Terry	202.422.1079 Cell	
	Yaba Baker	301.214.6600 /	ykbaker@nyl.com
		202.359.1938 Cell	
	Joyce Swinson	301.980.9694	igswinson@ft.newyorklife.com
Valic	Aprenea	410.859.2164 /	aprenea.mccutchen@valic.com
	McCutchen	443.802.5998 Cell	
	Larry Perez	800.892.5558 ext. 87821	larry.perez@valic.com
		240.459.5153 Cell	
	Amanda Maggio	800.892.5558 ext. 88399	amanda.maggio@valic.com
		703.663.6709 Cell	
	Peter A. Ramig	800.892.5558 ext. 88128	peter.ramig@valic.com
		503.757.3147 Cell	
ICMA-RC 401a/457	Investment	800.669.7400	service@DCretire.com
	Representatives		

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How to Enroll

Welcome Workshop provides new employees with an introduction to DCPS, a discussion of DCPS personnel policies, and information about employee benefits.

You will be able to enroll in benefits following your Welcome Workshop, so we encourage all new employees to thoroughly review this Employee Benefits Guide.

YOU MUST ENROLL IN HEALTH AND LIFE INSURANCE BENEFITS WITHIN 31 DAYS OF YOUR EFFECTIVE HIRE DATE

TOP 4 ENROLLMENT QUESTIONS ANSWERED

1. How do I enroll in benefits online?

New employees can begin to make benefits selections online through PeopleSoft Employee Self Service (ESS) following their effective hire date. You must have your PeopleSoft user id and password to access the online system. Employee Services will send you an email that will include your user id and password.

2. When does my life insurance coverage begin?

Life insurance coverage begins on your first day of employment.

3. How do I confirm that my benefits elections were processed?

Following your successful enrollment, you will receive a confirmation email from PeopleSoft that will include a list of all of the benefits options that you selected. If you do not receive a confirmation email or if the email does not include the options you selected, contact the Benefits team immediately via email at dcps.benefits@dc.gov.

4. When does my health insurance and additional optional benefits coverage begin?

The effective date of coverage for health insurance and additional optional benefits begins on the first day of the pay period following your online enrollment. Note that it takes the insurance providers 30-45 days from your online enrollment date to confirm enrollment. Wait until you receive enrollment cards to use your benefits for non-emergency services.

Accessing PeopleSoft Employee Self Service

Why should I use ESS?

PeopleSoft Employee Self Service (ESS) is the most convenient way to view, manage, and update your DCPS personal and pay information. ESS is used by all employees to enroll in benefits within the first 31 days of employment. In addition to benefits enrollment, ESS is an easy way to do the following: view your paycheck prior to payday; make changes to your beneficiaries, tax deductions, and direct deposit information; and update personal information, such as mailing & email address, phone numbers, and your emergency point of contact.

How to Log into Your PeopleSoft Employee Self Service Account



- Log onto Employee Self Service.
 If you are using a computer on the DCPS network use http://pshcm.dc.gov.
 If you are using a computer from home or outside the DCPS network use http://ess.dc.gov.
- 2. We highly recommend that the first time you log onto ESS that you use a DCPS networked computer. Additionally, you will be required to change your password (minimum of six characters -- must be a mix of letters and numbers).

What You Need To Update In Your Profile

All employees must update their personal information, direct deposit information, and tax withholdings and enroll in benefits. Note: only benefits-eligible employees will be able to access the benefits enrollment screen within the first 31 days of hire. If you are transferring positions, you are not eligible to enroll in benefits.



What You Need To Update In Each Section

Personal Information	Payroll & Compensation	Benefits
Can only update from DC Gov't	Update from any computer	Update from any computer
computer		
 Add Contact Information Add Email Address Add Emergency Contacts Verify Personal Details 	 Add Direct Deposit Information Add W-4 Information Add State Tax Information Select the state where you live 	 Benefits Guide

Direct Deposit

You are strongly encouraged to utilize the direct deposit system to receive your paycheck. Pay is

Direct Deposit

deposited to your account at 12:00am on the pay date. The maximum number of accounts that you can have in the system is four.

1. Click Add Account.



- 2. Type in the Routing Number of your banking institution.
- 3. Type in the Account Number of your banking institution and select the account type (checking or savings).
- Select your Deposit Type.

Amount: Select a specific amount to be deposited.

Balance: Used when selecting more than one account. Percent: You may select any percentage amount.

Select your Deposit Type.

Amount: Select a specific amount to be deposited.

Balance: Used when selecting more than one account.

Percent: You may select any percentage amount.

- Select Deposit Order. 6.
- 7. Click Save.



Personal Information

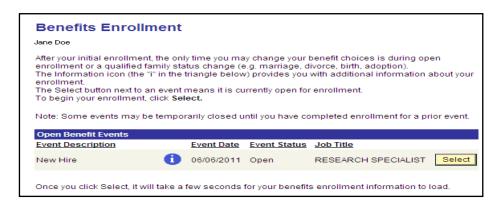
You can change all of your personal information through ESS **except Name and Marital Status.** To change this information, provide proof of the requested status change to Employee Services either in person or via fax to 202.442.5315, Attention: Data Changes. For more information, contact HR Answers at dcps.hranswers@dc.gov or via phone at 202.442.4090.



Accessing PeopleSoft Employee Self Service (continued) Benefit Enrollment

How to Enroll in Benefits

1. Click Select to open your benefit event.

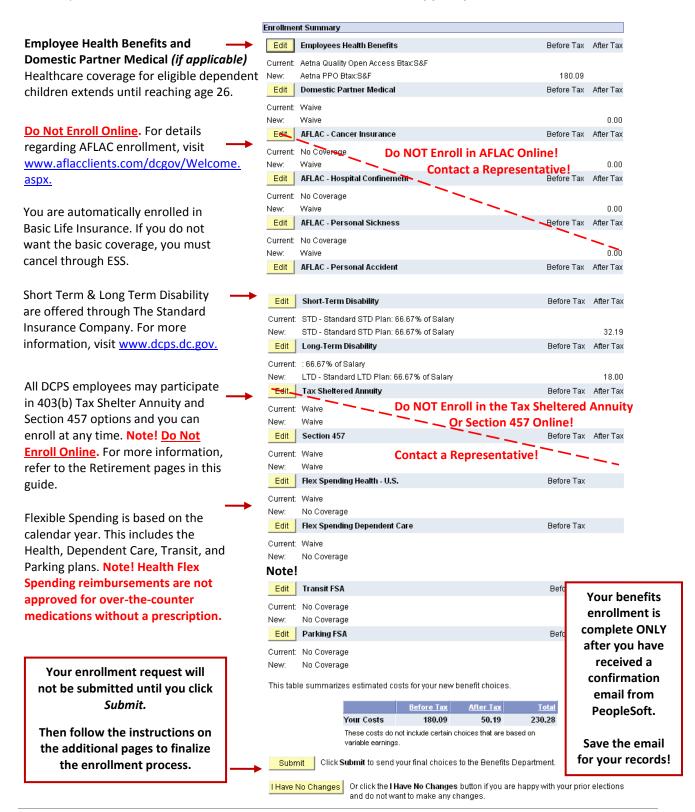


You will have only 31 days from the date of hire to enroll in benefits. If you are still within your 31 day enrollment period and are unable to access your benefits beyond this screen, send an email that includes your name and employee id number to dcps.benefits@dc.gov. Your request for assistance will be responded to within two business days.

Before making your benefit elections, carefully review your *Employee Benefits Guide* to determine the benefit(s) that you would like to enroll in. You can only access your benefits enrollment event <u>once</u> within your 31 day enrollment period. Selections take 48 hours to appear on your PeopleSoft benefits summary screen.

Upon completion of enrollment, you will receive a benefits confirmation summary via email. Check your dc.gov email account within 48 hours of your enrollment. If you do not receive a benefits confirmation summary within 48 hours, your enrollment was unsuccessful and you will need to contact Employee Services **immediately** via email at dcps.benefits@dc.gov. Your request for assistance will be responded to within two business days.

1. Edit your Enrollment Summary. Click the *Edit* buttons to make your choices. Upon completion, you will receive a confirmation email -- be sure to save a copy for your records.

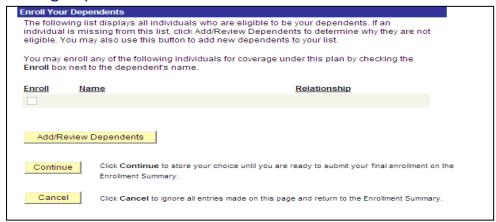


Health Coverage Options

The most up-to-date premium rates are provided within the health coverage options section below. Please note that you have the option to have your health insurance premiums deducted pre-tax, which allows your premiums to be deducted from your gross pay prior to taxes being calculated. You may wish to consider this option if you want to reduce your taxable salary.

If you are enrolling a domestic partner (same-sex or common law) or a domestic partner and children, you must elect to have your benefits deducted after-tax. Therefore, your premiums will be deducted from your gross pay after taxes are calculated.

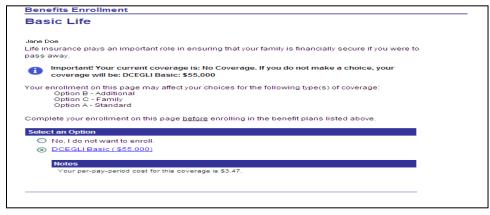
Adding Dependents to Health Insurance



To add dependents to your health insurance coverage, you must have their full name, date of birth, and social security number at the time of online enrollment. Additionally, you will need to submit documentation showing proof of relationship to Employee Services within 31 days of your enrollment. Please refer to your *Employee Benefits Guide* for more information regarding required documentation.

Electing Life Insurance

You may elect to have additional life insurance coverage beyond the basic plan during your 31 day enrollment period. Refer to your *Employee Benefits Guide* for more information regarding your life insurance options.



Designating Life Insurance Beneficiaries

When selecting your life insurance plan(s), you also will need to designate beneficiaries, and you will need to provide personal contact information for each of your beneficiaries. You're able to add and make changes to your life insurance beneficiaries at any time throughout the year using ESS.



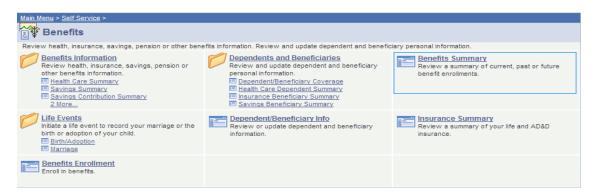
Confirming Your Benefits Elections

Once you have completed your elections, carefully read each enrollment confirmation screen. You will be required to click "Submit" twice and "Ok" once. After you complete your online benefits enrollment, a confirmation email entitled "Benefits Enrollment Summary" will be sent automatically to your dc.gov email account.

If you do not receive an email confirmation of your benefits enrollment, you have not successfully enrolled and you will not be covered for any benefit. Please log into PeopleSoft and re-enroll into the option(s) of your choice using the steps provided above.

Reviewing Your Benefits Elections

Within 48 hours following the completion of your benefits elections, you will be able to review your benefits summary in ESS. Access the Benefits section and select Benefits Summary.



When reviewing your Benefits Summary, make sure that the enrollment date reflects the actual date when your coverage will begin.

If you did not add your life insurance beneficiaries during enrollment, you can update your beneficiaries through the Benefits Summary screen.





Benefits Enrollment Confirmation

Once you have successfully completed your Benefits Enrollment, you will receive a Benefits Enrollment Summary emailed to your dc.gov email address. See sample below:

From: pshcm@dc.gov [mailto:pshcm@dc.gov]
Sent: Tuesday, December 1, 2015 6:23 AM

To: New-Hire, Happi (DCPS) **Cc:** Benefits, DCHR (DCHR)

Subject: Benefits Enrollment Summary - Happi New-Hire (00099000)

A change has been processed using your DC Government PeopleSoft Self Service account. If you did not make these online changes, please contact your HR Department or phone the help desk at 727-8700, Monday - Friday, between the hours of 8am and 6pm.

Dear Ms. New-Hire (00099000):

The following is your Benefits Enrollment Summary:

Benefit Plan: **Employees Health Benefits** New: Aetna HMO-DC Before Tx:Self Only

After Tax Amount is \$0.00 Before Tax Amount is \$65.92

Benefit Plan: AFLAC - Cancer Insurance

New: Waive

After Tax Amount is \$0.00 Before Tax Amount is \$0.00 Benefit Plan: **Basic Life**

New: DCEGLI Bas: 1 X Salary + 2000 : \$41,000

After Tax Amount is \$6.36 Before Tax Amount is \$0.00

Benefit Plan: Option B - Additional

New: Waive

After Tax Amount is \$0.00 Before Tax Amount is \$0.00

Benefit Plan: Option C - Family

New: Waive

After Tax Amount is \$0.00 Before Tax Amount is \$0.00

Benefit Plan: Short-Term Disability

New: Waive

After Tax Amount is \$0.00 Before Tax Amount is \$0.00

Benefit Plan: Long-Term Disability

New: Waive

After Tax Amount is \$0.00 Before Tax Amount is \$0.00

Benefit Plan: Tax Sheltered Annuity

New: Waive

After Tax Amount is \$0.00 Before Tax Amount is \$0.00

Benefit Plan: Section 457

New: Waive

After Tax Amount is \$0.00 Before Tax Amount is \$0.00

Benefit Plan: 529 College Savings Plan

New: Waive

After Tax Amount is \$0.00 Before Tax Amount is \$0.00

Benefit Plan : Flex Spending Health - U.S.

New: Healthcare Acct.: \$750.00 After Tax Amount is \$0.00 Before Tax Amount is \$27.78

Benefit Plan: Flex Spending Dependent Care

New: No Coverage After Tax Amount is \$0.00 Before Tax Amount is \$0.00 Benefit Plan: Transit FSA New: No Coverage After Tax Amount is \$0.00

Health Benefit Plan Premium Rates

DC Employees Health Benefits (for employees hired on or after 10/01/1987)

The premium rates listed below are for the 2016 Calendar Year. This includes ET-15 teachers who work ten-months of the year but are paid over 12 months.

Cost of Benefits for Domestic Partners and Domestic Partners + Children

Please note that if you are enrolling a domestic partner <u>or</u> a domestic partner and children, you will pay the *Domestic Partner Family* rate AFTER-TAX.

AETNA HEALTHCARE CONSUMER DRIVEN HEALTH PLAN (CDHP)

TYPE	ENROLLMENT CODE	2016 PREMIUM BI-WEEKLY	2016 PREMIUM MONTHLY
Self-Only	HM1	\$ 35.38	\$ 76.65
Self + 1	HM2	\$ 69.54	\$ 150.67
Family	HM3	\$ 103.23	\$ 221.50

AETNA HMO

TYPE	ENROLLMENT CODE	2016 PREMIUM BI-WEEKLY	2016 PREMIUM MONTHLY
Self-Only	AH1	\$ 73.92	\$ 160.16
Self + 1	AH2	\$ 145.30	\$ 314.82
Family	AH3	\$ 213.61	\$ 462.82

AETNA PPO

TYPE	ENROLLMENT CODE	2016 PREMIUM BI-WEEKLY	2016 PREMIUM MONTHLY
Self-Only	AP1	\$ 81.62	\$ 176.86
Self + 1	AP2	\$ 160.45	\$ 347.65
Family	AP3	\$ 235.88	\$511.08

KAISER PERMANENTE HMO

TYPE	ENROLLMENT CODE	2016 PREMIUM BI-WEEKLY	2016 PREMIUM MONTHLY
Self-Only	KP1	\$ 64.94	\$ 140.70
Self + 1	KP2	\$ 124.03	\$ 268.73
Family	KP3	\$ 190.26	\$ 412.24

UNITED HEALTHCARE CHOICE NATIONWIDE

TYPE	ENROLLMENT CODE	2016 PREMIUM BI-WEEKLY	2016 PREMIUM MONTHLY
Self-Only	MD1	\$ 70.31	\$ 152.34
Self + 1	MD2	\$ 134.29	\$ 290.97
Family	MD3	\$ 206.01	\$ 446.35

	Aetna H Preferred	Healthcare CDHP Non-Preferred	Aetna HMO	Aetna Preferred	PPO Non-Preferred	Kaiser Permanente HMO	United Healthcare Choice Nationwide
Deductible (ded) Per Calendar Year	\$1,300 self \$2,600 family	\$2,500 self \$5,000 family	None	\$750 self \$1,500 family	\$1,500 self \$3,000 family	None	None
Health Savings Account (HSA)		•			•	00 Self/ \$6,250 Self +1/ \$6,250 Family d a Healthcare Flexible Spending Accou	unt.
Out of Pocket Maximum Annual Copay	\$3,425 self \$6,850 family	\$6,450 self \$12,900 family	None	\$1,500 self \$3,000 family	\$3,000 self \$6,000 family	\$3,500 self \$9,400 family	\$3,500 self \$9,400 family
Primary Care Physician (PCP) Selection	N	ot Required	Not Required	Not Rec	quired	Required	Not Required
Referral Required for Specialist	N	ot Required	None	Not Red	quired	Required	Not Required
Preventive Care Office Visit	No Charge	40% after ded	No Charge	No Charge	25% after ded	No Charge	No Charge
Primary Care Office Visits	15% after ded	40% after ded	\$10 copay	\$15 copay	25% after ded	\$10 per visit (Waived for kids under 5)	\$10 copay
Specialist Office Visit	15% after ded	40% after ded	\$20 copay	\$30 copay	25% after ded	\$20 per visit	\$20 copay
Routine Pediatric Care	Covered 100%	40% after ded	Covered 100%	Covered 100%	25% after ded	\$10 per visit	\$10 copay
Emergency Service:							
Urgent Care Office Visit	15% after ded	40% after ded	\$20 copay	\$25 copay	25% after ded	\$10 per visit (PCP) /\$20 per visit (Specialty)	\$20 copay
Emergency Room Visit	15% <i>F</i>	After Deductible	\$50 copay	\$100 copay Waived if admitted	\$100 copay after deductible	\$50 per visit (waived if admitted)	\$50 copay (waived if admitted)
Ambulance Service	15% <i>F</i>	After Deductible	No Charge	Covered 100%	25% after ded	No Charge	No Charge
Medical Equipment	85% A	After Deductible	50% Coinsurance	85% After D	eductible	50% Coinsurance	50% Coinsurance
Mental Health: In-Patient	85% after ded	40% after ded	\$100 per admission	Covered 100% after ded	25% after ded	\$100 per admission	\$100 per admission
Mental Health: Out-Patient	85% after ded	40% after ded	\$10 copay visits	\$15 copay after ded	25% after ded	\$10 per visit for individual therapy \$5 per visit for group therapy	\$10 copay
Pharmacy (Retail) G: Generic P:Preferred N:Non Preferred	G:\$10/ P:\$30/ N	N:\$60 20% after copay	G:\$20/ P:\$40/ N:\$55	G:\$10/P:\$20/N:\$40	Not Covered	G:\$10/P:\$15 /N:\$55	Tier1:\$20 / Tier2:\$40 / Tier3:\$55
Hospitalization	15% after ded	40% after ded	\$100 per admission	Covered 100% after ded	25% after ded	\$100 per admission	\$100 per admission
Infertility Treatment	Cost sharing	based on service type	50% of charges	Cost sharing based	d on service type	50% of allowable charge	50% of allowable charge
Pregnancy Office Visits	15% after ded	40% after ded	\$20 initial visit, 100% covered thereafter	\$30 copay Initial visit only	25% after ded	No chargeRoutine pre-natal visit (after confirmation of pregnancy) and first post-natal visit	\$10 copay applies to first visit only
Diagnostic Lab Work & X-Ray	15% after ded	40% after ded	Covered 100%	Covered 100% if part of office visit	25% after ded t	No charge	No charge
Dental Care Discount	Dental (Discount Provided	Discount Program	Dental Discou	nt Provided	\$30 for preventive dental care services	N/A
Vision Care		per 24 months for 1 exam per 12months	\$100 per 24 months \$20 copay	\$30 copay/ 1 visit per 24 mths \$100 per 24 mths.	Not Covered	\$10 per visit (PCP) /\$20 per visit (Specialty)	N/A
	Aetna H Preferred	Healthcare CDHP Non-Preferred	Aetna HMO	Aetna Preferred	PPO Non-Preferred	Kaiser Permanente HMO	United Healthcare Choice Nationwide

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Life Insurance – Premium Rates

2016 DCEGLI LIFE INSURANCE PREMIUM RATES

Following are premium rates for the DC Life Insurance plans, which are available for all benefits-eligible employees hired on or after 10/01/1987. Actual bi-weekly rates are automatically calculated when enrolling through PeopleSoft Employee Self Service.

Basic - Annual Salary + \$2,000

Basic Coverage – Biweekly Rates
\$0.090 per \$1,000 of coverage
\$0.063 per \$1,000 is employee's share
\$0.027 per \$1.000 is District's share

Option A - Standard \$10,000 coverage

AGE	BI-WEEKLY PREMIUM RATE
Under 35	\$0.352
35 – 39	\$0.440
40 – 44	\$0.704
45 – 49	\$1.144
50 – 54	\$1.936
55 – 59	\$3.960
60+	\$6.160

Option B - Additional Coverage 1x - 5x Annual Salary

Bi-weekly premium per \$1,000 of coverage

Di weekly premium per \$1,000 or develage			
AGE	BI-WEEKLY PREMIUM RATE		
Under 35	\$0.035		
35 – 39	\$0.044		
40 – 44	\$0.070		
45 – 49	\$0.114		
50 – 54	\$0.194		
55 – 59	\$0.396		
60+	\$0.748		

Option C - Family Coverage

Bi-weekly premium for family unit

Refer to PeopleSoft to view bi-weekly premiums for this life insurance option.

Sample Bi-Weekly Cost

Annual Salary: \$39,452 40,000 + 2,000 =\$42,000 x (\$0.063/1000) = \$2.65

Sample Bi-Weekly Cost

Annual Salary: \$39,452 Age: 41

Round salary to nearest \$1,000

Divide salary by 10,000 and multiply by age group

(\$40, 000/10,000) x 0.704 = \$2.82

Sample Bi-Weekly Cost

Annual Salary: \$39,452 Age: 41

Election: 5x salary

Round salary to nearest \$1,000 Divide age category rate by 1,000 Multiply number above by number of times you want to elect

Multiply by salary

 $(0.070/1000) \times 5 \times $40,000 = 14.00

Points of Contact

Frequently Requested Phone Numbers & Email Addresses

DCPS Central Office

DCPS Office	Email/ Why Contact	Phone Number	Fax Number
Employee Services	mailto: dcps.hranswers@dc.gov	202.442.4090	202.442.5315
Payroll Office	Paycheck errors, leave errors	202.442.5300	202.442.5306
IT Help Desk	Email login issues, lost passwords	202.442.5715	

Health Benefits

Provider	Website	Member Services Contact	Group ID Number
Aetna Healthcare	www.aetna.com	800.872.3862	172614
Kaiser Permanente	www.kp.org	301.468.6000	7029
United Healthcare	www.myuhc.com	866.633.2446	712971

Dental & Optical Plans

Provider	Website	Member Services Contact	Group ID Number
Cigna Dental Health	www.cigna.com	1.800.367.1037	2466814
Quality Plan	www.gualitualanadmin.com	202.722.2744 or	100
Administrators	www.qualityplanadmin.com	1.800.900.4112	100

Life Insurance

Provider	Website	Group ID number	
The Standard	www.standard.com	641332-B	

Additional Benefits

Benefit Type	Administrator	Website	Phone Number
Flexible Spending Accounts: Health, Dependent, and Commuter Transit/Parking	Benefit Resource, Inc.	www.BenefitResource.com	800.473.9595
Short Term/Long Term Disability	The Standard	www.standard.com	800.426.4332
AFLAC Indemnity Plans	ALFAC	www.aflac.com	202.379.4755
Travel Assistance	Frontier MEDEX (Group #9061)	www.medexassist.com/standard/standard1.aspx	800.527.0218
Employee Assistance Program	COPE Inova	www.cope-inc.com www.inova.org/eap	800.841.7406 800.346.0110

Frequently Asked Questions

Holidays

Q. What are the paid holidays for District of Columbia Government non-union employees in Central Office positions?

A. The paid holidays for DC Government non-union employees in Central Office positions for calendar year 2016 are as follows:

- New Year's Day
- Martin Luther King, Jr. Birthday
- President's Day
- Emancipation Day
- Memorial Day
- Independence Day

- Labor Day
- Columbus Day
- Veterans Day
- Thanksgiving Day
- Christmas Day

Q. What are the paid holidays for EG-classified employees in union positions?

A. Employees in Council of School Officers (CSO) or American Federation of State, County, and Municipal Employees (AFSCME) positions should refer to their union's Collective Bargaining Agreement with DCPS for a complete list of paid holidays.

Q. If I want to participate in a religious or cultural holiday not shown above, what type of leave would I use?

A. EG, EX, MSS, DS, CS, LS, and LX employees are required to use sick leave to participate in religious and or cultural holidays. All other employees are required to use annual leave. The leave request must be submitted to your supervisor in advance.

Health, Dental, and Optical

Q. Does my health insurance cover all of my family members, including my parents and grandchildren?

A. No, health insurance is solely reserved for you, your spouse, and eligible dependents under the age of 26.

Q. Can I enroll my eligible dependent from another country who does not have a social security number yet?

A. Yes, you have 31 days from their date of arrival to the United States to add them to your plan. You must provide a copy of the dependent's visa.

Q. How long will it take for me to receive my health insurance card?

A. It will take approximately four to six weeks from the effective date of your online enrollment before you receive your health insurance card.

Q. If I do not see deductions for insurance options on my paycheck, should I assume that I am covered for the benefit(s)?

A. No, if you do not see deductions on your paycheck on the expected deduction begin date, there may be an issue with your enrollment and you should not use the service. Contact HR Answers immediately at 202.442.4090 or dcps.hranswers@dc.gov to confirm your enrollment coverage. If you decide to use the service, without making a payment through payroll deductions, you will be charged for the entire cost of the service.

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Q. Is Dental and Optical coverage included with my health coverage?

A. Many of the health insurance plans include dental and/or optical discounts (see the above Health Insurance Comparison chart for plan specifics). However, you also automatically will be enrolled in separate Dental and Optical plans (employee coverage) through providers outside of your health insurance provider. This coverage is separate and distinct from what is provided through your health insurance plan. See the Explanation of Benefits – Dental and Optical above for more details, as well as information about how to enroll your dependents.

Q. What is the difference between in-network care and out-of-network care?

A. You should carefully weigh the pros and cons of utilizing services in-network vs. out-of-network. If you elect to use out-of-network services, this allows you to see physicians of your choice, even if they are not part of the health provider's network. However, you will be required to pay a deductible per year based on your coverage type, and co-payments for out-of-network office visits and services usually are higher. Usually there is no deductible or a significantly smaller deductible for in-network care.

Q. What is a primary care physician?

A. A primary care physician (PCP) is a physician with a concentration in Internal Medicine, Family Practice, or Pediatrics. In an HMO, all care must be coordinated through your PCP.

Q. Can I enroll in the health insurance plan at any time?

A. No, as a general rule you may enroll in the health insurance plan only during your first 31 days of employment and during the benefits Open Enrollment period. However, if you have a qualifying event, such as a status change, marriage, divorce, adoption, or birth, you may enroll within 31 days of that qualifying event.

Q. Are my dependents automatically dropped from my insurance once they become over age for coverage?

A. No, you are required to notify DCPS, in writing, when your dependents become over age. Until then, your coverage will continue at a family rate and no refunds will be issued.

Q. If my employment terminates, can I continue my health insurance coverage for my family and myself?

A. Yes, you may continue coverage under Temporary Continuation of Coverage (TCC) for you and your dependents for at least 18 months, provided you were previously covered. TCC also is known as COBRA.

Short/Long Term Disability Insurance

Q. Am I automatically enrolled in the Short & Long Term Disability Plans?

A. No, participation in the plans is optional. You must enroll when first hired or during benefits Open Enrollment.

Q. Can I cancel Short/Long Term Disability at any time during the year?

A. No, you can only cancel during benefits Open Enrollment.

Q. How do I submit a Short/Long Term Disability claim?

A. To file a claim, contact the Standard Insurance Company at 800.426.4332.

Flexible Spending Accounts

Q. How do I know if either of the Flexible Spending Accounts is right for me?

A. A flexible spending account may be right for you if you have medical expenses that are not covered by your health insurance plan or you pay for a dependent care program. You can elect up to \$2,500 per year for healthcare expenses and up to \$5,000 per year for dependent care. The elected amounts are deducted from your paycheck in equal installments on a pre-tax basis.

Q. What types of expenses are considered eligible for the healthcare account?

A. A wide variety of items and services may be reimbursable. Examples of items include, but are not limited to: dental, vision, hearing services, medications, co-payments, medically prescribed treatments, and smoking cessation programs. A detailed list of eligible expenses can be found online at www.BenefitResource.com.

Q. What happens to the money in my account if I do not use it by the end of the calendar year?

A. Under IRS regulations, up to \$500 will roll over to the next calendar year for Healthcare Flexible Spending account only. You will forfeit any money in your Dependent Care account that is unused at the end of the calendar year; therefore, employees are encouraged to plan cautiously.

Q. Does my enrollment in FSA roll over each calendar year?

A. No, you will need to enroll in a FSA option during benefits Open Enrollment for each year that you elect to participate.

Q. Can I change my deductions for a Commuter account at any time?

A. Yes, pre-tax commuter accounts can be changed or cancelled at any time during the calendar year.

Q. Does my enrollment in a Commuter account roll over each year?

A. No, you will need to enroll in a Commuter account during benefits Open Enrollment for each year that you elect to participate.

Q. What happens to the money in my Commuter account if I do not use it by the end of the calendar year?

A. You will forfeit any money in your Commuter account that is unused at the end of the calendar year; therefore, employees are encouraged to plan cautiously.

Life Insurance

Q. Can I add or increase my life insurance coverage during the benefits Open Enrollment period?

A. No, opportunities to enroll in a life insurance option you previously declined, or to increase your life insurance amount, are strictly limited and typically are not offered during the benefits Open Enrollment period. However, you can decrease your supplemental life insurance coverage at any time.

Q. Can I change my beneficiary designations at any time or only during the benefits Open enrollment period?

A. Changes to beneficiaries can be made any time. It is recommended that you review and update your beneficiary designations in Employee Self Service following life events (e.g., birth of child, marriage, divorce, etc).

Q. Can I obtain life insurance coverage for my family members?

A. Yes, you may purchase optional life insurance to cover your spouse or children, but only during the benefits Open Enrollment period for life insurance. However, if you have a qualifying event including, but not limited to, marriage, divorce, adoption, or birth of a child, you may enroll within 31 days of that event.

Q. If I terminate employment, can I take my current life insurance coverage with me?

A. Yes, an employee can convert the group coverage policy into an individual whole life policy by completing a life insurance conversion form within 31 days of termination.

Supplemental Retirement Plans

Q. Can I enroll via PeopleSoft for a 457 Deferred Compensation Plan and/or 403(b) Tax Shelter Annuity Plan?

A. No, if you elect a 457 Deferred Compensation Plan and/or a 403(b) Tax Shelter Annuity Plan benefit through PeopleSoft, your election will not be honored. You must contact a 457 or 403(b) vendor to enroll (approved 457 & 403(b) vendor contact information on pp. 14 - 16). If you do enroll via PeopleSoft, the money will be deducted from your paycheck and held in escrow. Following the escrow waiting period, the funds will be returned to you and taxed as income.

Q. What is the benefit of contributing to a 403(b) Plan?

A. When you contribute to a 403(b) Plan, you do not pay income tax on allowable contributions until you begin making withdrawals from the 403(b) Plan. Usually, this does not happen until you retire. In addition, as a convenience to you, allowable contributions to a 403(b) Plan are deducted from your paychecks.

Q. How long does it take to be vested in my 403(b) Plan?

A. You always are 100% vested in your 403(b) Plan contributions.

Q. Can I take loans and/or withdrawals from my 403(b) Plan?

A. Yes, you can take a tax-free loan from your 403(b) Plan. However defaulted loan amounts are taxed as ordinary income and may be subject to a 10% Federal tax penalty if under age 59½. In addition to loans, you can take hardship withdrawals from your 403(b) Plan. However, in the event of a hardship withdrawal, your payroll deductions will be stopped for a period of six months, per IRS regulations.

Q. How do I take out a loan or hardship withdrawal?

A. To take out a loan or hardship withdrawal, make the initial request with your 403(b) Plan representative, and he/she will provide you with the appropriate forms for processing. Submit your paperwork to DCPS-Employee Services for review, verification, and Plan Administrator signature via fax (202.535.2112) or email (dcps.retirement@dc.gov). Once DCPS-Employee Services has completed the form, we will email it to you and your 403(b) vendor.

Q. Who is eligible to participate in the 457 Plan?

- A. All classifications of DCPS employees are eligible to participate in the 457 Plan, with the following exceptions:
 - WAE
 - Temporary
 - Part-Time (employees who work less than 20 per week)
 - Substitute Teachers

Q. How long does it take to be vested in my 457 Plan?

A. You are always 100% vested in your 457 Plan contributions.

Q. When are you eligible to participate in the 457 Plan?

A. You are eligible to participate in the 457 Plan immediately upon employment.

Q. How do I enroll in the 457 Plan?

A. Contact a ICMA-RC representative (approved 457 Vendor contact information on pp. 15 - 16). After speaking with your ICMA-RC representative, you may be directed to enroll online, by telephone, or in person, and any requisite paperwork will be provided to you. Once your account has been set up, complete a Salary Reduction Agreement and return it to DCPS-Employee Services. Your Salary Reduction Agreement will authorize that TSA deductions are taken from your paycheck. The entire process takes up to four pay periods for your account to be set up and your payroll deductions to begin.

Q. Can I take loans and/or withdrawals from my 457 Plan?

A. You cannot take loans from your 457 Plan. However, you can take hardship withdrawals, under certain conditions mandated by the IRS. As a general rule, a withdrawal while you are employed with DCPS is allowed only for an unforeseeable emergency that causes a severe financial hardship.

Q. Can I obtain life insurance coverage for my family members?

A. Yes, you may purchase optional life insurance to cover your spouse or children, but only during the benefits Open Enrollment period for life insurance. However, if you have a qualifying event including, but not limited to, marriage, divorce, adoption, or birth of a child, you may enroll within 31 days of that event.

Q. If I terminate employment, can I take my current life insurance coverage with me?

A. Yes, an employee can convert the group coverage policy into an individual whole life policy by completing a life insurance conversion form within 31 days of termination.

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